FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

SAFS ADD IO DM L. IC

	TO Olice Than All Additionage Committee					Office Use Only			
1. NAME OF TY COMMITTEE (in full)	PE OR PRI	NT 🔻	Example: If typing, type over the lines.			12 FE FR MAIL CENTER			
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Check if different	than previously			e 1d [N 460,74-					
2. FEC IDENTIFICATION NUM	BER ♥	<u></u>	CITY			STATE _	ZIP	CODE A	
C 0052 245	8	;	3. IS THIS REPORT	_	NEW N) OR	X AN	ENDED		
4. TYPE OF REPORT (Choose One)	(b) Monthly Report		Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)	
(a) Quarterly Reparts:	Due on	•	Mar 20 (M3)	•	Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
April 15 Quarterly Report (Q1)			Apr 20 (M4)	•	Jul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)	
	(c) 12	-Day		Primary (12P)		General (12G)		Runoff (12R)	
July 15 Quarterly Report (Q2) October 15	1	RE-Election eport for th		Convention (12C)		Special (12S)			
Quarterly Report (Q3) January 31 Year-End Report (YE)		ε	lection on	12 22 / D D /		y y y in the State of			
July 31 Mid-Year Report (Non-election Year Only) (MY)	PC	30-Day POST-Election Report for the:		General (30G)		Runoff (30R)		Special (30S)	
Termination Report (TER)		•	lection on	RZ RA /	0 0 /	4	in t Sta	he te of	
5. Covering Period $ ot\!$	່ ເໍ ຮ້	'Žŏ	ΪŽ	through	Ö	135	之的	$\check{\sim}$	
I certify that I have examined this f					belief it is tru	e, correct and	d complete.		
Type or Print Name of Treasurer	Chris	210 BN	uc Zc	110					
Signature of Treasurer		1		<u></u>	Da	ate [o	115	- Zò i ż	
NOTE: Submission of false, erroneou	s or incomp	lete inform	nation may s	ubject the per	son signing th	is Report to th	ne penalties of	2 U.S.C. §437g.	
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